

AOT Resources and Background:

Kentucky Revised Statutes 202A.081-0831,
<https://apps.legislature.ky.gov/law/statutes/chapter.aspx?id=38119>

Administrative Office of the Courts, AOT forms 737-737.6 & AOC 034, <https://kycourts.gov/Pages/index.aspx>

Civil Commitment and the Mental Health Care Continuum: Historical Trends and Principles for Law and Practice, <https://www.samhsa.gov/sites/default/files/civil-commitment-continuum-of-care.pdf>

Mental Illness Policy Org, <https://mentalillnesspolicy.org/aot/overview.html>

SMI Adviser, https://smiadviser.org/knowledge_post/assisted-outpatient-treatment-aot-promising-practices-an-overview

Treatment Advocacy Center,
www.treatmentadvocacycenter.org



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Kentucky Assisted Outpatient Treatment (AOT) Pilot Project Grant

In July 2020, KY Department of Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) received a federal grant to fund a pilot project for 192 Assisted Outpatient Treatment (AOT) cases in Kentucky. The project coordinates the work of Community Mental Health Centers and state psychiatric hospitals in filing Tim's Law petitions and providing treatment to individuals under court order. The project is currently operating in the region served by Central State Hospital (CSH), and will begin operating in Western State Hospital's (WSH) region in 2022. In the CSH region, Communicare, Inc., and Seven Counties Services perform initial evaluations and provide community-based treatment; in the WSH, region Pennyroyal Center and River Valley Behavioral Health will provide these services. Working with University of Kentucky's School of Social Work, evaluation efforts are also funded by the grant, and part of a larger national review of AOT effectiveness.

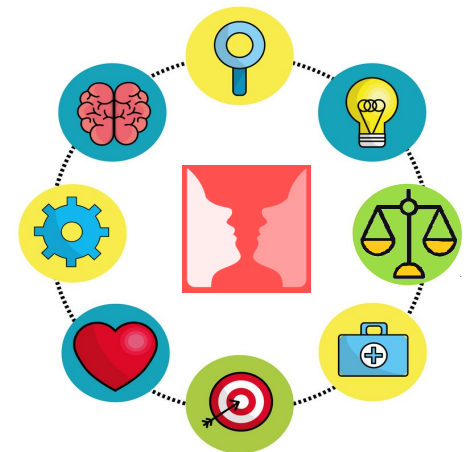
Our Kentucky AOT Services Partners:



Seven Counties Services

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The Assisted Outpatient Treatment (AOT) Process in Kentucky



In 2017, the General Assembly passed Kentucky's first AOT statute. *Tim's Law*, named for Tim Morton, a Lexington man with schizophrenia who was unable to acknowledge his own diagnosis and illness. During his lifetime, he was committed to inpatient treatment dozens of times, resisted attempts at outpatient treatment, and ultimately died in 2014 at age 56 from neglected health problems. Thanks to the efforts of his parents, advocacy groups, mental health agencies, and many others, Kentucky took a significant step toward stopping "the revolving door of jails, hospitals and homelessness with little benefit for such individuals." (Courier-Journal, 6/24/2016)

What is AOT?

Assisted Outpatient Treatment (AOT) is a civil legal procedure by which a court can order an individual with serious mental illness to follow a treatment plan in the community. One of the primary goals of AOT is to ensure individuals diagnosed with a Serious Mental Illness (SMI) do not experience a lapse in the continuity of their mental health care, thereby reducing the risk of incarceration or hospitalization while improving their health and well-being.

AOT is not appropriate for all (or even most) individuals with SMI. It is a less invasive intervention than psychiatric hospitalization, designed to interrupt the repeated hospitalization—release—decompensation cycle of the small subset who have demonstrated an inability to maintain treatment engagement on a voluntary basis (often due to *anosognosia* -- an inability to recognize their own illness and need for treatment). Regular court supervision and more intensive outpatient treatment are designed to support and assist the individual's success in the community. Through reduction of hospitalizations and criminal justice involvement, individuals are better served and scarce resources conserved.

Ultimately, AOT is a partnership between individuals, communities, courts, service providers, and government agencies designed to improve the quality of life for individuals with SMI, and reducing the use of financial and community resources.

Who May Request an AOT Order?

Any interested person can file a petition in District Court asking for AOT. This includes a: Qualified Mental Health Professional, County Attorney or Commonwealth's Attorney, peace officer, spouse or other relative, friend, or guardian.

Who is Eligible for AOT?

To qualify for AOT, an individual must:

- Have been involuntarily hospitalized pursuant to KRS 202A.051 at least two (2) times in the past twenty-four (24) months;
- Be diagnosed with a serious mental illness (SMI); and
- Be unlikely to adequately adhere to outpatient treatment on a voluntary basis, based on: a mental health professional's evaluation of current status; treatment history; ability to recognize his or her SMI diagnosis; and need of court-ordered AOT as the least restrictive, appropriate mode of treatment.

How Is the AOT Process Initiated?

After a petition has been filed in District Court, a judge will: determine if there is probable cause to proceed; order an evaluation by a mental health professional; consider the results of the evaluation and listen to testimony from all of the participants; and decide if an AOT order is appropriate. The individual has the right to be represented by his or her own attorney at all stages.

If AOT is deemed appropriate for the individual, the court will order him or her to participate in a treatment plan presented by a designated mental health treatment agency and attend regular court supervision meetings. The court order may last up to 360 days. If the court finds AOT is not appropriate or needed, the petition will be dismissed.

What Happens After an Individual is Ordered to Participate in AOT?

The designated mental health treatment provider will have an intake interview with the individual and arrange for needed services.* These services may include, but are not limited to: medication, therapy, general health services, housing support, vocational training, educational services, and transportation. The services may be delivered by the same agency, or referred to another community provider. The treatment provider will also attend court supervision with the individual to update the judge on progress, needs, and future plans, and the judge will continue to work with both to ensure success.

The individual or treatment provider may request the judge modify the AOT order if circumstances change, either positively or negatively, or the order period could be extended. AOT recognizes that participating individuals have, and will continue, to face, many challenges related to their Serious Mental Illness as they re-establish themselves in the community. Re-hospitalization, criminal justice involvement, and other issues are recognized as part of the recovery process, and will be addressed as part of the treatment plan.

If an individual fails to comply with an AOT order, a 72 emergency psychiatric admission pursuant to KRS 202A.031 could be ordered, but the court cannot order the individual's arrest for contempt.

*When a judge orders AOT, they must identify where the funds will come from to pay for it. Most medical services will be paid for by a third party insurer or Medicaid; some services and programs specified in the treatment plan are offered at no cost to participants; family members or others may agree to pay for uncovered costs; and grants are available in some circumstances. However, individuals cannot be ordered to pay for the cost of AOT services themselves.

